

MMMR

MORBIDITY AND MORTALITY WEEKLY REPORT

Current Trends

Community Water Fluoridation — United States

A recently completed CDC survey (1) reveals there are more than 105,000,000 persons in the United States having access to water supplies whose fluoride content has been adjusted to the optimum level for dental health or whose natural fluoride content is at optimum or higher levels. This total represents 49.4% of the total population in the United States and 59.3% of the U.S. population served by public water supplies (Figure 1). The survey, current as of December 31, 1975, also indicates that 6,795 communities adjust the fluoride content of their water supplies to the optimum level for dental health, while 2,630 communities have a natural fluoride level which provides their residents with the dental benefits of optimally fluoridated water. Currently, 22 states, the District of Columbia, and Puerto Rico provide fluoridated water to over half of their

populations. One hundred seventeen of 170 (70%) cities with populations of 100,000 or more have optimally fluoridated water.

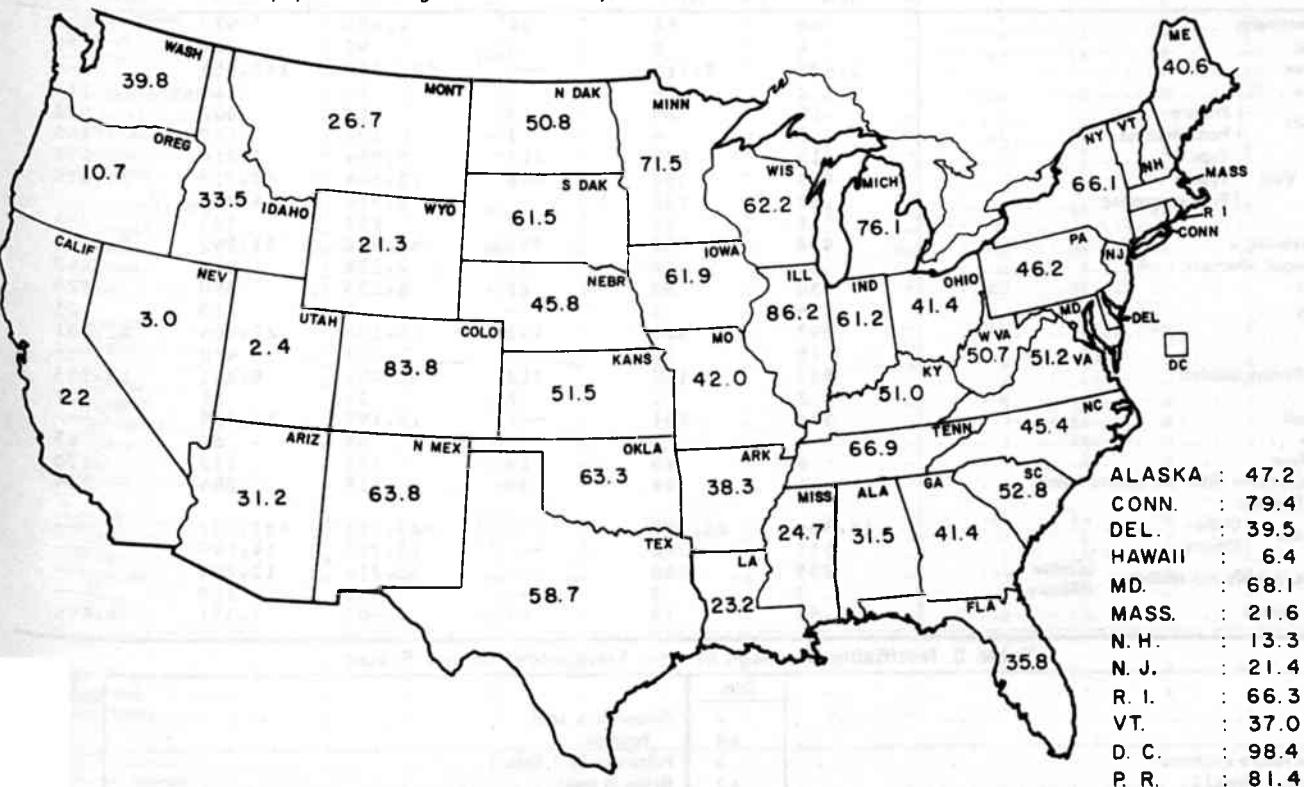
Reported by the Dental Disease Prevention Activity, Bur of State Services, CDC.

Editorial Note: The 49.4% of the total population using fluoridated water represents a 6.4% increase from the 43.0% reported in the 1969 Fluoridation Census. During the 6-year interval between the 2 surveys, adoption of fluoridation in more communities and population growth accounted for approximately 16.9 million additional U.S. citizens receiving the benefits of this public health measure.

Reference

1. Center for Disease Control: Fluoridation Census, 1975. Issued April 1977

FIGURE 1. Percent of state population using fluoridated water, 1975



Epidemiologic Notes and Reports**Outbreak of Acute Gastroenteritis Due to Copper Poisoning — Vermont**

Three employees at a Vermont hospital became ill with nausea and vomiting on the afternoon of March 28, 1977, within 5 minutes after consuming a carbonated soft drink in the hospital coffee shop. A survey of hospital employees revealed 46 additional individuals who had onset of gastrointestinal symptoms during the afternoon or evening of the same day. Of 231 individuals who ate or drank in the coffee shop, 38 developed illness versus 11 of 461 employees who did not visit the coffee shop ($\chi^2=44.1$ $p<0.01$). Of the 189 employees who drank, with or without ice, water or carbonated beverages made from this water, 36 became ill versus 1 of 39 employees who did not consume one of these beverages ($\chi^2=5.3$ $p<0.02$). (A beverage history was not available on the other ill individual who had visited the coffee shop.) Twenty-one of these 36 ill individuals had onset within 2 hours of being in the coffee shop.

Samples of water and of ice produced in an ice machine on the same water distribution system indicated pH levels below 5.4 (the normal water pH level for this community is 6.8) and the presence of a blue precipitate. After resuspension of the precipitate in the laboratory, the copper levels in the water and ice samples ranged from 7-70 mg/l. (The Environmental Protection Agency recommends that copper in public water supply sources not exceed 1 mg/l [1].)

Blood and stool samples for copper were normal in those individuals tested, but samples were collected more than 24 hours after illness ended.

The carbonated beverages were dispersed from a machine that was supplied by carbonated water produced in a system adjacent to the machine. Carbon dioxide gas from pressurized tanks was mixed with water to form the carbonated water used in the soft drink dispenser. A defective check valve had permitted the CO₂ gas and carbonated water to flow back into the copper piping of the hospital water system. Leaching of the copper from the pipes resulted in high levels of copper in the water supplied to the beverage and ice machines and to the tap.

Reported by AJ Hamel, Medical Center Hospital of Vermont, Burlington; R Drawbaugh, MS, AM McBean, MD, WN Watson, MD, Acting State Epidemiologist, LE Witherell, PE, MPH, Vermont State Dept of Health; and Environmental Hazards Activity, Chronic Diseases Div, Bur of Epidemiology, CDC.

Editorial Note: Ingestion of beverages containing high concentrations of copper (2), zinc (3), and tin (4) has been associated with acute gastroenteritis within one hour of exposure. No chronic systemic effects have been noted in such acute exposures. Leaching of metals from the lining of storage containers by acidic beverages has been the usual

(Continued on page 223)

Table I. Summary—Cases of Specified Notifiable Diseases: United States*(Cumulative totals include revised and delayed reports through previous weeks)*

DISEASE	26th WEEK ENDING		MEDIAN 1972-1976	CUMULATIVE, FIRST 26 WEEKS		
	July 3, 1977	July 2, 1976		July 3, 1977	July 2, 1976	MEDIAN 1972-1976
Aseptic meningitis	60	51	68	1,056	972	1,006
Brucellosis	4	5	5	97	129	89
Chickenpox	2,497	2,118	---	150,954	140,551	---
Diphtheria	2	4	2	52	116	116
Encephalitis Primary	15	25	13	317	402	422
Post-Infectious	2	4	7	102	150	150
Type B	218	321	217	7,984	7,314	3,939
Hepatitis, Viral Type A	433	752	848	15,664	17,713	20,815
Type unspecified	152	158	1	4,576	4,380	1
Malaria	16	14	7	217	185	156
Measles (rubeola)	548	732	595	43,932	31,842	22,434
Meningococcal infections, total	30	24	27	1,058	912	842
Civilian	30	23	27	1,053	899	825
Military	-	1	-	5	13	21
Mumps	297	495	963	14,208	29,903	42,431
Pertussis	16	15	---	363	470	---
Rubella (German measles)	383	140	312	17,091	9,831	13,983
Tetanus	2	1	2	26	21	37
Tuberculosis	544	701	---	15,199	16,569	---
Tularemia	4	1	3	55	63	63
Typhoid fever	6	15	14	178	170	170
Typhus, tick-borne (Rky. Mt. spotted fever)	44	34	34	419	284	284
Venereal Diseases:						
Gonorrhea Civilian	15,384	20,253	---	465,013	483,582	---
Military	555	296	---	13,255	14,149	---
Syphilis, primary and secondary Civilian	255	390	---	10,216	12,254	---
Military	7	2	---	150	169	---
Rabies in animals	50	35	63	1,402	1,351	1,499

Table II. Notifiable Diseases of Low Frequency: United States

	CUM.		CUM.
Anthrax:	-	Poliomyelitis, total:	4
Botulism:	69	Paralytic:	4
Congenital rubella syndrome:	8	Psittacosis: Pa. 1, Colo. 1	33
Leprosy: Fla. 1, Hawaii 2	62	Rabies in man:	1
Leptospirosis: Fla. 1	25	Trichinosis:	50
Plague:	4	Typhus, murine: Tex. 1	33

Table III
Cases of Specified Notifiable Diseases: United States
Weeks Ending July 2, 1977 and July 3, 1976 - 26th Week

AREA REPORTING	ASEPTIC MENIN- GITIS	BRUCEL- LOSIS	CHICKEN- POX	DIPHTHERIA		ENCEPHALITIS		HEPATITIS, VIRAL			MALARIA		
						Primary: Arthropod- borne and Unspecified	Post In- fectious	Type B	Type A	Type Unspecified			
	1977	1977	1977	1977	CUM. 1977	1977	1976	1977	1977	1977	1977	CUM. 1977	
UNITED STATES	60	4	2,497	2	52	15	25	2	218	433	152	16	217
NEW ENGLAND	6	-	390	-	-	-	-	-	8	13	12	1	9
Maine	-	-	4	-	-	-	-	-	-	-	-	-	-
New Hampshire*	-	-	2	-	-	-	-	-	-	1	-	-	-
Vermont	-	-	-	-	-	-	-	-	1	-	-	-	1
Massachusetts	5	-	208	-	-	-	-	-	-	4	8	-	2
Rhode Island	1	-	70	-	-	-	-	-	1	4	-	-	2
Connecticut	-	-	106	-	-	-	-	-	6	4	4	1	4
MIDDLE ATLANTIC	6	-	614	-	5	4	3	1	46	81	33	5	57
Upstate New York	2	-	366	-	-	-	-	1	6	12	3	-	14
New York City	-	-	227	-	5	1	1	-	11	13	5	1	25
New Jersey	2	-	NN	-	-	3	1	-	17	30	23	1	7
Pennsylvania	2	-	21	-	-	-	1	-	12	26	2	3	11
EAST NORTH CENTRAL	10	-	928	-	-	3	4	-	39	76	21	4	17
Ohio*	-	-	61	-	-	-	2	-	7	17	-	-	6
Indiana	6	-	35	-	-	3	-	-	-	3	3	2	2
Illinois	-	-	309	-	-	-	1	-	6	24	10	1	2
Michigan	4	-	329	-	-	-	1	-	20	27	8	1	4
Wisconsin	-	-	194	-	-	-	-	-	6	5	-	-	3
WEST NORTH CENTRAL	-	-	88	-	4	-	1	-	16	19	9	-	16
Minnesota	-	-	1	-	-	-	1	-	5	2	-	-	4
Iowa	-	-	3	-	-	-	-	-	4	1	2	-	-
Missouri	-	-	2	-	1	-	-	-	-	10	4	-	8
North Dakota*	-	-	-	-	-	-	-	-	-	-	-	-	-
South Dakota	-	-	-	-	-	-	-	-	-	1	-	-	1
Nebraska*	-	-	82	-	-	-	-	-	6	2	1	-	-
Kansas	-	-	-	-	-	-	-	-	1	3	2	-	3
SOUTH ATLANTIC	10	-	192	-	-	2	3	-	37	93	22	1	30
Delaware	-	-	1	-	-	-	-	-	2	-	-	-	-
Maryland	1	-	3	-	-	-	2	-	10	6	2	-	7
District of Columbia	-	-	4	-	-	-	-	-	3	3	1	-	1
Virginia*	-	-	20	-	-	-	1	-	1	4	6	-	4
West Virginia*	-	-	53	-	-	2	-	-	1	4	-	-	1
North Carolina	6	-	NN	-	-	-	-	-	3	9	6	-	4
South Carolina	-	-	7	-	-	-	-	-	-	1	2	-	-
Georgia	-	-	-	-	-	-	-	-	4	33	-	1	7
Florida*	3	-	104	-	-	-	-	-	13	33	5	-	6
EAST SOUTH CENTRAL	7	2	4	-	-	-	6	-	24	40	5	2	5
Kentucky	2	-	4	-	-	-	-	-	-	-	-	3	-
Tennessee	5	2	NN	-	-	-	1	-	18	32	4	-	-
Alabama	-	-	-	-	-	-	-	-	5	3	1	2	2
Mississippi	-	-	-	-	-	-	5	-	1	5	-	-	-
WEST SOUTH CENTRAL	18	2	44	1	2	6	1	1	14	38	27	1	11
Arkansas*	-	-	-	-	-	-	-	-	1	4	-	-	-
Louisiana	NA	NA	NN	NA	-	NA	1	NA	NA	NA	NA	NA	1
Oklahoma	1	-	3	-	-	1	-	-	3	3	2	-	-
Texas	17	2	41	1	2	5	-	1	10	31	25	1	10
_MOUNTAIN	-	-	100	-	3	-	-	-	10	57	14	2	8
Montana	-	-	8	-	-	-	-	-	-	1	-	-	-
Idaho	-	-	3	-	-	-	-	-	-	7	-	-	-
Wyoming	-	-	-	-	-	-	-	-	-	-	-	-	1
Colorado*	-	-	72	-	-	-	-	-	5	17	3	1	5
New Mexico	-	-	1	-	2	-	-	-	2	11	3	1	1
Arizona	-	-	NN	-	1	-	-	-	3	14	4	-	1
Utah	-	-	12	-	-	-	-	-	-	7	4	-	-
Nevada	-	-	4	-	-	-	-	-	-	-	-	-	-
PACIFIC	3	-	137	1	41	-	7	-	24	16	9	-	64
Washington	-	-	123	1	38	-	-	-	5	2	7	-	4
Oregon	3	-	-	-	-	-	-	-	7	10	2	-	1
California	NA	NA	NA	NA	1	NA	7	-	NA	NA	NA	NA	53
Alaska	-	-	3	-	2	-	-	-	2	1	-	-	2
Hawaii	-	-	11	-	-	-	-	-	6	3	-	-	4
Guam*	NA	NA	NA	NA	-	NA	-	-	NA	NA	NA	-	-
Puerto Rico	-	-	12	-	-	1	-	-	1	1	4	-	1
Virgin Islands	-	-	2	-	-	-	-	-	-	-	-	-	-

NN: Not notifiable

NA: Not available

*Delayed reports: Asep. meng: Fla. delete 2; Chickenpox: N. Hamp add 31, Guam add 3; Enceph.: Ark. add 1; Hep. B: Ohio add 1, Neb. delete 1, Va. add 1, W. Va. delete 1, Fla. delete 3, Colo. delete 1, Guam add 1; Hep. A: Ohio delete 1, N. Dak. add 1, Va. add 2, W. Va. add 1, Fla. delete 1, Guam add 1; Hep. unspc.: Neb. add 1, Va. delete 3, Guam add 1

Table III-Continued
Cases of Specified Notifiable Diseases: United States
Weeks Ending July 2, 1977 and July 3, 1976 - 26th Week

REPORTING AREA	MEASLES (Rubella)			MENINGOCOCCAL INFECTIONS TOTAL			MUMPS		PERTUSSIS	RUBELLA		TETANUS
	CUMULATIVE		1877	CUMULATIVE		1877	CUM. 1877	1877	1977	1877	CUM. 1877	CUM. 1877
	1877	1878		1877	1878							
UNITED STATES	948	48,932	31,842	30	1,058	912	297	14,208	16	383	17,091	26
NEW ENGLAND	47	2,412	348	2	43	41	9	604	-	19	1,144	-
Maine	3	163	6	-	3	-	3	45	-	-	68	-
New Hampshire*	3	508	7	-	3	4	-	89	-	4	239	-
Vermont	-	291	19	-	4	3	-	5	-	-	63	-
Massachusetts*	13	644	36	1	13	11	4	111	-	10	358	-
Rhode Island	-	58	14	-	-	4	-	49	-	-	130	-
Connecticut	28	748	266	1	20	19	2	305	-	5	286	-
MIDDLE ATLANTIC	400	7,500	6,564	7	153	121	68	1,127	3	242	5,618	2
Upstate New York	308	3,214	2,731	-	36	46	28	240	2	217	3,044	1
New York City	55	544	393	4	35	34	20	414	-	13	284	-
New Jersey	10	190	575	-	29	17	19	330	-	8	1,750	1
Pennsylvania	27	3,552	2,865	3	53	24	1	143	1	4	540	-
EAST NORTH CENTRAL ..	185	9,741	13,605	2	103	117	128	4,940	1	72	3,481	2
Ohio	37	978	550	1	36	49	-	620	-	9	1,080	-
Indiana	38	4,223	2,922	-	7	5	6	261	-	2	878	1
Illinois	49	1,373	1,415	-	19	12	17	814	-	9	287	-
Michigan	12	858	5,524	1	28	43	79	1,750	-	45	871	1
Wisconsin	49	2,309	3,194	-	13	8	26	1,495	1	7	365	-
WEST NORTH CENTRAL ..	42	9,350	1,159	-	64	65	21	3,329	-	-	483	3
Minnesota	7	2,591	389	-	21	14	-	5	-	-	16	1
Iowa*	27	4,263	36	-	5	8	-	1,241	-	-	156	-
Missouri*	7	918	14	-	26	21	13	1,039	-	-	33	1
North Dakota	1	21	3	-	1	3	-	13	-	-	10	-
South Dakota*	-	51	4	-	4	2	-	59	-	-	17	-
Nebraska	-	192	54	-	1	4	8	63	-	-	2	-
Kansas	-	1,314	659	-	6	13	-	909	-	-	249	1
SOUTH ATLANTIC	149	4,155	1,805	12	229	180	15	610	1	24	1,535	8
Delaware	-	22	126	-	3	3	7	102	-	-	23	-
Maryland	23	366	671	-	15	16	-	44	-	-	5	-
District of Columbia	-	1	9	-	-	2	-	5	-	-	-	-
Virginia	110	2,454	498	1	14	30	1	81	-	1	557	1
West Virginia	3	202	172	-	8	4	3	139	-	2	92	-
North Carolina	9	59	-	3	57	34	4	36	1	21	435	-
South Carolina	-	145	4	2	24	31	-	10	-	-	206	-
Georgia	2	720	1	1	38	16	-	13	-	-	47	1
Florida*	2	186	324	5	70	44	-	180	-	-	170	6
EAST SOUTH CENTRAL ..	49	1,839	744	2	118	81	18	736	-	12	1,881	2
Kentucky	41	1,106	706	-	19	14	-	79	-	-	73	1
Tennessee	8	629	23	1	32	35	17	438	-	11	1,692	1
Alabama	-	76	-	1	46	23	-	191	-	-	108	-
Mississippi	-	28	15	-	21	9	1	28	-	1	8	-
WEST SOUTH CENTRAL ..	27	1,982	626	2	186	144	28	1,228	4	4	732	4
Arkansas*	-	28	-	-	9	8	-	30	-	-	3	1
Louisiana	NA	74	180	-	68	26	NA	30	NA	NA	26	1
Oklahoma	-	52	282	-	11	18	2	447	-	-	27	-
Texas	27	1,828	164	2	98	92	26	721	4	4	676	2
MOUNTAIN	38	2,399	4,931	2	39	28	6	552	1	6	329	1
Montana	6	1,133	201	-	2	3	-	7	-	-	12	-
Idaho	2	127	2,020	-	4	3	1	118	-	1	11	-
Wyoming	-	13	3	-	1	-	-	-	-	-	2	1
Colorado	4	480	236	-	1	5	-	246	-	3	229	-
New Mexico	2	267	15	-	17	3	2	104	1	-	9	-
Arizona	24	286	225	1	11	8	-	-	-	-	10	-
Utah	-	6	2,168	1	2	4	-	67	-	-	47	-
Nevada	-	87	63	-	1	2	3	10	-	2	9	-
PACIFIC	11	9,554	2,060	1	123	135	4	1,082	6	4	1,888	4
Washington	7	509	310	1	16	20	-	254	4	-	429	-
Oregon	3	318	133	-	11	13	3	195	2	-	98	-
California	NA	8,637	1,615	-	72	90	NA	590	NA	NA	1,337	4
Alaska	1	56	-	-	22	10	-	25	-	-	1	-
Hawaii	-	34	2	-	2	2	1	18	-	4	23	-
Guam*	NA	4	10	-	-	-	NA	2	NA	NA	6	-
Puerto Rico	16	757	250	1	1	3	39	543	-	-	29	7
Virgin Islands	2	12	7	-	-	-	3	179	-	1	1	-

NA: Not available

*Delayed reports: Measles: N. Hamp. add 1, Mass. delete 1, Iowa delete 5, Mo. delete 2, S. Dak. add 14, Fla. add 2, Ark. add 1; Mumps: Guam add 1; Pertussis: N. Hamp. add 5, Ark. add 1; Rubella: Guam add 1

Gastroenteritis — Continued

mechanism of beverage contamination. Although these substances may impart an unpleasant taste to the beverage (the taste threshold for copper is 1.0 — 5.0 mg/l) (7), soft drink flavoring may mask the objectionable taste.

References

- Environmental Studies Board, National Academy of Sciences, National Academy of Engineering: Water Quality Criteria 1972.

International Notes**Salmonella Surveillance — Czechoslovakia**

In 1939, Czechoslovakia started systematic surveillance of *Salmonella* isolates. That year, only 7 different *Salmonella* serotypes were reported in the country. After World War II, expanded importation of different products of animal origin was followed by a mass importation of new, exotic *Salmonella* types. By 1962, 89 *Salmonella* types were identified in Czechoslovakia; by 1972, the number was up to 171, by 1976, 188.

Following the war, the introduction of new serotypes was associated with the importation of dry egg powder, eggs, pigs, poultry, and bone and fish meals from other continents. One of these new serotypes was *S. agona*, imported from Africa in fish meal. The first isolation of this serotype from man in Czechoslovakia was reported in 1970. By 1971, it was fifth in importance of *Salmonellae* causing disease in man. From 1972 through 1975, it was the most important cause of human infection in outbreaks and in sporadic cases. In 1976, it was third, with *S. typhimurium* first.

Current Trends**Results of Testing for Gonorrhea — United States
12-Month period Ending December 31, 1976**

In the 12-month period ending December 31, 1976, a total of 8,953,358 specimens were taken from women as part of gonorrhea testing programs; 391,809 (4.4%) were found to be positive. Table 1 reflects the results of such testing by the types of health care facilities securing the

- Washington, D.C., the Environmental Protection Agency, 1973
 2. Semple AB, Pang WH, Phillips DE: Acute copper poisoning: An outbreak traced to contaminated water from a corroded geyser. *Lancet* 2:700-701, 1960
 3. Brown MA, Thom JV, Orth GL, et al: Food poisoning involving zinc contamination. *Arch Environ Health* 8:657-660, 1964
 4. Barker WH, Runte V: Tomato juice-associated gastroenteritis. Washington and Oregon, 1969. *Am J Epidemiol* 96:219-226, 1972

S. agona is often isolated from material of animal origin — including meat and eggs — and from husbandry feeds in Czechoslovakia's State Veterinary Service Laboratories. Also, the number of cases of person-to-person transmission in families and especially in maternity wards of hospitals continues to increase. Enhanced virulence and transmission in relatively low infective doses both have been observed with this serotype.

Reported by K Raska, MD, DSc, Institute of Landscape Biology Czechoslovak Academy of Sciences; D Matejovska, PhD, CSc, Head, Salmonella Reference Laboratory, Czechoslovakia.

Editorial Note: This corroborates previous descriptions of the rapid emergence and unusual epidemiologic virulence of *S. agona* (1,2).

References

- Clark GM, Kaufmann AF, Gangarosa EJ, Thompson MA: Epidemiology of an international outbreak of *Salmonella agona*. *Lancet* 2:490-493, 1973
- MMWR 26:129-130, 1977

TABLE 1. Results of gonorrhea culture tests on females — United States,* January 1976-December 1976

REPORTING SOURCE	NUMBER TESTED	NUMBER POSITIVE	PERCENT POSITIVE	REPORTING SOURCE	NUMBER TESTED	NUMBER POSITIVE	PERCENT POSITIVE
Health Care Providers (Excluding VD Clinics)	8,025,502	218,490	2.7	Health Care Providers (Excluding VD Clinics—Con't.)			
Health Department Non-VD Clinic	1,798,370	55,676	3.1	Private Physicians	2,254,238	44,178	2.0
Family Planning	1,292,224	39,489	3.1	Private Family Planning Groups	984,498	15,905	1.6
Prenatal, Ob-Gyn	189,973	5,434	2.8	Group Health Clinics	140,490	2,789	2.0
Cancer Detection	24,459	293	2.1	Student Health Centers	218,633	3,924	1.8
Combinations or Other	292,714	10,460	3.6	Manpower Training Agencies	11,786	665	5.6
Public/Private Hospital—Outpatient	1,468,092	60,845	4.2	Industrial Screening	3,314	74	2.2
Family Planning	242,624	7,850	3.2	Military/Dependents	92,376	2,096	2.3
Prenatal, Ob-Gyn	322,676	10,417	3.2	Correctional or Detention Centers	56,532	2,819	5.0
Cancer Detection	19,808	509	3.0	Not Specified	151,595	5,707	3.8
Combinations or Other	880,984	41,989	4.8	Veneral Disease Clinics	927,856	173,319	18.7
Public/Private Hospital—Inpatient	66,815	1,724	2.6	TOTAL (All Clinics)	8,953,358	391,809	4.4
Obstetric	4,207	97	2.3				
Gynecologic	1,380	37	2.7				
Combinations or Other	61,348	1,590	2.6				
Community Health Centers	778,663	22,110	2.8				
Family Planning	253,813	4,987	2.0				
Prenatal, Ob-Gyn	56,874	1,366	2.4				
Cancer Detection	9,269	62	.7				
Combinations or Other	458,807	15,715	3.4				

*Excludes Trust Territories (April-December 1976).

Gonorrhea — Continued

Among 2,254,238 women tested by private physicians, cultures from 44,176 (2.0%) were positive.

Provisional data indicate that an additional 2,133,908 women were tested at all types of facilities in January-

March 1977, or about 711,303 per month. For this period, the overall positivity rate of cultures from all sources was 4.4%.

Reported by Venereal Disease Control Div, Bur of State Services, CDC.

Legionnaires' Disease — United States

Nineteen sporadic cases of pneumonia with onset since August 1, 1976, apparently due to the bacterium that caused Legionnaires' disease have been identified. From 3 of the cases the bacterium has been isolated; in the other 16 4-fold or greater rises in IFA titer to the bacterium were found. Six cases were fatal. Sixteen cases were in men; ages ranged from 31 to 67 years. Cases have been recognized in residents of 11 states including California (2), Florida (1), Indiana (1), Massachusetts (4), Michigan (3), Missouri (2), New Jersey (1), Pennsylvania (1), Tennessee (1), Vermont (2), and Washington (1).

Reported by P Nash, PhD, Bur of Laboratories, Pennsylvania Dept of Health; Leprosy and Rickettsia Br, Viral Diseases Div, Bur of Laboratories, and Special Pathogens Br, Bacterial Diseases Div, Bur of Epidemiology, CDC.

Editorial Note: The wide distribution of sporadic cases of illness apparently due to the bacterium that caused Legionnaires' disease and the occurrence of outbreaks as early as 1965 (1) suggest that the disease is neither new nor localized. Investigation continues into the possible source of the bacterium in nature.

Reference

- MMWR 26:9-11, 1977

International Notes**Quarantine Measures**

The following changes should be made in the listing of U.S. Designated Yellow Fever Vaccination Centers included in the "Supplement—Health Information for International Travel," MMWR, Vol. 24, December 1975:

The following new Centers have been designated:

ALABAMA

Huntsville: Madison County Health Department, 304 Eustis Avenue 35804, 205-539-3711, Clinic hours: Mon.—Fri., 8 a.m.—12 noon; 1-4:30 p.m., Fee charged.

CALIFORNIA

Berkeley: City Health Department, 2180 Milvia Street 94707, 415-644-6459, Clinic hours: Thurs., 2-4 p.m.; first Tues., ea. mo., 5:30-7 p.m., Fee charged.

Santa Barbara: Santa Barbara Vaccination and Immunization, Medical Clinic, 1421 Chapala Street, Suite 8, 93101. 805-966-9808

ILLINOIS

Chicago: Rush-Presbyterian-St. Luke's Medical Center, 1753 West Congress Parkway 60612, 312-942-5865, Clinic hours: Mon., Tues., and Wed., 9 a.m.—12 noon. 312-942-5865

INDIANA

South Bend: St. Joseph County Health Dept, County-City Bldg. 8th Floor 46601, 219-289-9574, Clinic hours: Mon.-Fri., 8 a.m.—4:30 p.m., fee charged.

MICHIGAN

Grand Rapids: Kent County Health Dept, 1619 Walker Ave., N.W. 49504, 616-774-3023, Clinic hours: By appointment, Fee charged.

OKLAHOMA

Guymon: Texas County Health Dept., 1410 North East Street 73942, Clinic hours: Mon.—Fri., 8 a.m.—5 p.m., Fee charged. 405-338-8544

TEXAS

Houston: Jimmie L. Bergeron, M.D., Suite F, 710 F.M. 1960 West 77090, 713-444-1715, Clinic hours: Mon.-Fri., 8 a.m.—5 p.m.; by appointment weekends & holidays.

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